Approved for use through 06/30/2010, OMB 0651-0032

Under the Paperwork Reduct	ion Act of 199	5 no persons are requ	uired to re	spond to e collection	n of informa	tion unless it displays	a valid OMB control number	
FEE TRANSMITTAL For FY 2008				Complete if Known				
				Application Number 10/530,464				
				Filing Date	0	04/05/2005		
				First Named In	ventor T	Tara Nylese		
Applicant claims small entity status. See 37 CFR 1,27				Examiner Name	e D	Diramio, Jacqueline		
				Art Unit	10	1641		
TOTAL AMOUNT OF PAYMENT (\$) 5				Attorney Docke	t No. 1	10442-004		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 504149 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
Information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type		Small Entity		Small Entity		Small Entity	F B-14 (A)	
Utility	310	Fee (\$)	Fee (\$		Fee (\$		Fees Paid (\$)	
Design	210	155	510	255	210	105		
Plant	210	105 105	100	50	130	65		
Reissue	310	155	310	155	160	80		
Provisional	210	105	510	255	620	310	***************************************	
2. EXCESS CLAIM FEE		105	U	0	0	0		
							Small Entity Fee (\$)	
Each claim over 20 (including Reissues) 50							25	
Each independent claim over 3 (including Reissues) 210							105	
						370	185 endent Claims	
- 20 or HP =		x	=	Paid (\$)		Fee (\$)	Fee Paid (\$)	
HP = highest number of total		or, if greater than 20.				. 00 (4)	1001410101	
Indep. Claims - 3 or HP =	Extra Clair		Fee	Paid (\$)				
-3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). <u>Yotal Sheets</u> <u>Extra Sheets</u> Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
-100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)	
Other (e.g., late filing surcharge): difference between Appeal Brief Current Fees & amount proviously paid							\$5	
SUBMITTED BY								

Name (Print/Type) Ferdinand M. Romano This collection of information is required by 27 CFF, 1:38. The information is required to extent or retains a sendit by the public which a to tile (and by the USFTO to process) an explication. Controlled by a power by 3 U.S. C. 1:25 and 5 CFF 1:15. The collection is estimated to take 30 minutes to complete, including gathering, prepared, and submitting the completed application from to the USFTO. The will vary department set to take 30 minutes to complete, including gathering, prepared, and submitting the completed application from the USFTO. The will vary department and the controlled in the controlled per submitted by the controlled in the controlled per submitted by the controlled per subm

Signature

/Ferdinand M. Romano/

Registration No. (Attorney/Agent) 32,752

Telephone 407-926-7722

Date 05/08/2008